

FROM:

TO:

Keep yourself and your family healthy!
Look inside for important personal and confidential information



Come in for your immunizations!

Get all recommended immunizations for the best protection



NAME: _____

Vaccines needed:

- ☐ Chickenpox
- ☐ DTaP (diphtheria, tetanus, pertussis/whooping cough)
- ☐ Flu
- ☐ Hepatitis A
- ☐ Hepatitis B
- ☐ Hib (*Haemophilus influenzae* type b)
- ☐ HPV (human papillomavirus)
- ☐ Meningococcal
- ☐ MMR (measles, mumps, rubella)
- ☐ Pneumococcal
- ☐ Polio
- ☐ Rotavirus
- ☐ Shingles
- ☐ Td (tetanus, diphtheria)
- ☐ Tdap (tetanus, diphtheria, pertussis/whooping cough)
- ☐ Other: _____

Please call us today for an appointment:

Bring in your Immunization Record to be updated.

